

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
4	/					
5	/					
6	/					
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8	/					
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47			/			
48			/			
49			/			
50			/			
TOTAL IND.	/					
TOTAL DEP.	10					
TOTAL CLAIMS	25					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
61						
62						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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Patent and Trademark Office

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